

# CLAIMS ONLY

SERIAL NO. \_\_\_\_\_ FILING DATE \_\_\_\_\_

APPLICANT(S) \_\_\_\_\_

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
	1	1					
2	1						
3	2						
4	2						
5	1						
6	1						
7	1						
8	1						
9	2						
10	0						
11	2						
12	2						
13	2						
14	2						
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49							
50							
TOTAL IND.	1	1					
TOTAL DEP.	1	1					
TOTAL CLAIMS	2	2					

*	IND.	DEP.	*	IND.	DEP.	*	IND.	DEP.
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100								
TOTAL IND.								
TOTAL DEP.								
TOTAL CLAIMS								

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS